

**CLAIMS ONLY**

Application Number

10/785,437

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend				
1	/						51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
11							61			
12							62			
13							63			
14							64			
15	/						65			
16							66			
17	/						67			
18							68			
19							69			
20	/						70			
21							71			
22							72			
23	/						73			
24							74			
25							75			
26							76			
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28							78			
29							79			
30							80			
31							81			
32							82			
33							83			
34							84			
35							85			
36							86			
37							87			
38	/						88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	7						Total Indep			
Total Depend	44						Total Depend			
Total Claims	51						Total Claims			

Best Available Copy